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CONFIRMATION NO. 4998

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/684,440	10/15/2003 RULE	514	1635	ISPH-0595US.P1

APPLICANTS

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** CONTINUING DATA **********

This application is a CIP of 09/923,515 08/07/2001 and claims benefit of 60/475,402 06/02/2003

** FOREIGN APPLICATIONS **********

none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 02/05/2004

Foreign Priority claimed	STATE OR	SHEETS	TOTAL	INDEPENDENT
☐ yes ☒ no				
35 USC 119 (a-d) conditions met ☐ yes ☒ no ☐ Met after Allowance				
Verified and Acknowledged Examiner's Signature Initials	COUNTRY CA	DRAWING 0	CLAIMS 35	CLAIMS 4

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TITLE
Modulation of apolipoprotein (a) expression

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	☐ All Fees ☐ 1.16 Fees (Filing) ☐ 1.17 Fees (Processing Ext. of time)

RECEIVED 1256	No. _____ for following:	☐ 1.18 Fees (Issue) ☐ Other _____ ☐ Credit